

APPLICATION FOR CHANGE IN ZONING CLASSIFICATION

Fee: \$300.00		
Receipt #:		
Action by P&Z regarding recommendation to City Council		
Final action by City Council		
The City of Woodway Planning and Zoning Commission and City Council use the plan as a guide in considering requests for changes in zoning classification. Any change should be in general conformance with that plan, or the applicant should be present evidence to the P&Z and the City Council that the plan should be change to accommodate the requested change. Any requested change to a Planned U concept plan must be submitted to the City at least thirty (30) days prior to the which the plan is to be considered. Other requests for zoning changes are due 12 p.m. on the 25 th day prior to the first meeting at which the request is to be that the public hearing notice requirements may be met.	y requested uld be prepared nanged or varied Init Developme]nt e first meeting at	
TWO PUBLIC HEARINGS ARE REQUIRED		
It is imperative that the applicant, or the applicant's representative, be present at both the Planning and Zoning Commission meeting and the City Council meeting to answer any questions the P&Z or City Council may have. The Planning and Zoning Commission shall conduct the first public hearing and forward a		
recommendation to the City Council. The City Council will conduct the second and take final action.	public hearing	
ITEMS 1-8 TO BE COMPLETED BY APPLICANT		
(1) Legal description of property: Lot, Block addition to the City of Woodway, Te	exas	
OR If the property is not platted, applicant must mark the (line attach a complete field note description of the property to this application.		
 (2) Physical address of property:		

If yes, provide date(s):	
) Proposed use of property:	
) Reason for requested change:	
Applicant name:	
Business name, if applicable:	
Mailing address:	
Telephone number:	Fax Number:
Email Address:	
Owner of property (if applicant is not ov	vner):
Mailing address:	
	Fax number:
Telephone number:	
Email address: "I hereby certify that the above is true checked to determine what, if any, dee	and correct. In addition, I certify that I have d restrictions apply to this property, and have
Email address: "I hereby certify that the above is true	and correct. In addition, I certify that I have d restrictions apply to this property, and have
Email address: "I hereby certify that the above is true checked to determine what, if any, dee	and correct. In addition, I certify that I have d restrictions apply to this property, and have
"I hereby certify that the above is true checked to determine what, if any, dee found that there are none that conflict Signature of Applicant TO BE COMPLETED BY OW "My signature below is evidence that I	and correct. In addition, I certify that I have d restrictions apply to this property, and have with this request." Date NER (IF APPLICANT IS NOT OWNER)
"I hereby certify that the above is true checked to determine what, if any, dee found that there are none that conflict Signature of Applicant TO BE COMPLETED BY OW "My signature below is evidence that I	and correct. In addition, I certify that I have d restrictions apply to this property, and have with this request." Date NER (IF APPLICANT IS NOT OWNER) fully consent to the change in zoning
"I hereby certify that the above is true checked to determine what, if any, dee found that there are none that conflict Signature of Applicant TO BE COMPLETED BY OW "My signature below is evidence that I classification that is being requested or	and correct. In addition, I certify that I have d restrictions apply to this property, and have with this request." Date NER (IF APPLICANT IS NOT OWNER) fully consent to the change in zoning